#### WHAT HEALTH CARE REFORM MEANS FOR CHILDREN

### **Eliminates Pre-existing Coverage Exclusions for Children**

- Health insurers can no longer exclude coverage of children because of preexisting conditions.

### **Extends the Children's Health Insurance Program**

- Extends federal funding for the Children's Health Insurance Program (CHIP) through September 30, 2015, and provides states with additional funding to ensure children have access to this proven successful program.
  - Increases outreach and enrollment grants to help reach more eligible children.

#### Pediatric Benefit Package Includes Oral and Vision Coverage for all Children

- Requires coverage of not only basic pediatric services under all new health plans, but also oral and vision needs, starting in 2014. Many health plans do not provide coverage for needed child health services, and 12 percent of children have not had a doctor's visit in the past year.

#### More Pediatric Providers Where Kids Need Them

- Expands the health care workforce - including pediatricians, pediatric nurse practitioners, specialists in pediatrics, and pediatric oral health professionals - to ensure that children will have access to high quality health care. Parents enrolled in new plans will be

allowed to select their child's pediatrician.

# Improve Quality of Care for Children.

- Develops children's quality priorities and promote children's quality measurement and reporting to improve the care that our nation's children receive. A recent study found that children receive recommended care less than half of the time.

# **Coverage for Children Aging Out of Foster Care.**

- Makes mandatory the current state option to extend Medicaid coverage up to age 26 to foster children who have aged out of the foster care system, effective 2014. Children aging out of the foster care system face many challenges, including finding quality, affordable health insurance.

# **Initiatives to Address Childhood Obesity**

- Provides \$25 million in funding for the Childhood Obesity Demonstration Project, which was established through the Children's Health Insurance Program (CHIP) legislation signed by President Obama. The Secretary of Health and Human Services will award grants to develop a comprehensive and systematic model for reducing childhood obesity.
- Requires the Secretary to provide guidance to States and health care providers on preventive and obesity-related services available to Medicaid enrollees and requires each state to design a public awareness campaign on such services.

#### **Preventive Care for Better Health**

- New plans are required to cover prevention and wellness benefits. These benefits will be exempted from deductibles and other cost-sharing requirements. This will help ensure that all children have access to free preventive services.

- Investments in prevention and public health will encourage innovations in health care that prevent illness and disease before they require more costly treatment. Preventive care is a key first step towards the development of a healthy and long life, yet 32 percent of kids are overweight or obese, putting them at risk for conditions such as diabetes and heart disease.

## **Expands Coverage to Improve Access to Care**

- Provides health insurance choices through state-based health insurance Exchanges to families without job-based coverage and provides tax credits to those who can't afford it. Expanding insurance to all children will enable them to access needed care which is proven to enhance their development and learning, laying the foundation for a healthy life. Children who are uninsured have decreased access to well-child care, immunizations, basic dental services, and prescription medication.

#### **Lowers Health Care Costs**

- All lifetime limits on how much insurance companies cover if beneficiaries get sick and bans insurance companies from dropping people from coverage when they get sick are eliminated.
- The Act also restricts the use of annual limits in all new plans and existing employer plans this year, until 2014 when all annual limits for these plans are prohibited. Two-thirds of middle class families with access to employer-based coverage said their child remained uninsured because they could not afford the health plan. These reforms will help reduce health care costs for families and help to ensure more children are insured.
- Going forward, plans in the new Health Insurance Exchanges and all new plans will have a cap on what insurance companies can require beneficiaries to pay in out-of-pocket expenses, such as co-pays and deductibles.

### **Greater Choices to Meet the Health Care Needs of Children**

- Creates state-based health insurance Exchanges to provide families with the same private insurance choices that the President and members of Congress will have, including multistate plans to foster competition and increase consumer choice.

## **One-Stop Shopping - Putting Families in Charge**

- Provides standardized, easy-to-understand information on different health insurance plans offered in a geographic region so Americans can easily compare prices and health plans and decide which quality, affordable option is right for them and their children.

# **Insurance Security**

- Ensures that children have access to affordable child-only health insurance policies, regardless of whether their parents change jobs, leave a job, move, or get sick. Parents will be able to provide health coverage for their children regardless of their job situation.

#### **Extends Dependent Coverage**

- Young adults will be permitted to stay on their parents' health care plan until age 26. (This applies to all plans in the individual market, all new employer plans, and existing employer plans if the young adult is not eligible for employer coverage on his or her own. Beginning in 2014, children up to age 26 can stay on their parent's employer plan even if they have an offer of coverage through their employer.)